

**U.S. DISTRICT COURT FOR THE NORTHERN DISTRICT OF ILLINOIS
ATTORNEY APPEARANCE FORM**

NOTE: In order to appear before this Court an attorney must either be a member in good standing of this Court's general bar or be granted leave to appear *pro hac vice* as provided for by Local Rules 83.12 through 83.14.

In the Matter of

Case Number:

Michael C. May

08 CR 512

AN APPEARANCE IS HEREBY FILED BY THE UNDERSIGNED AS ATTORNEY FOR:

Mr. Michael C. May
For Initial Only

NAME (Type or print) <i>Mary H. Judge</i>	
SIGNATURE (Use electronic signature if the appearance form is filed electronically) <i>s/ [Signature]</i>	
FIRM FEDERAL DEFENDER PROGRAM	
STREET ADDRESS 55 E. Monroe Street, Suite 2800	
CITY/STATE/ZIP Chicago, Illinois 60603	
ID NUMBER (SEE ITEM 3 IN INSTRUCTIONS)	TELEPHONE NUMBER 312/621-8300
ARE YOU ACTING AS LEAD COUNSEL IN THIS CASE?	YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>
ARE YOU ACTING AS LOCAL COUNSEL IN THIS CASE?	YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>
ARE YOU A MEMBER OF THIS COURT'S TRIAL BAR?	YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>
IF THIS CASE REACHES TRIAL, WILL YOU ACT AS THE TRIAL ATTORNEY? YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>	
IF THIS IS A CRIMINAL CASE, CHECK THE BOX BELOW THAT DESCRIBES YOUR STATUS.	
RETAINED COUNSEL <input type="checkbox"/>	APPOINTED COUNSEL <input type="checkbox"/>